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ABSTRACT

These 4 papers were presented at the Canadian Guidance and Counselling Convention, 1971. (1) Hughes used a questionnaire to show that marihuana users were more likely to subscribe to the "hang-loose ethic," i.e., a personal and social ethic antagonistic to the ideas of the Protestant ethic, as manifested in their behaviors; self-concepts; educational, political and social attitudes; and in demographic characteristics. (2) Paterson, too, found habitual drug users frequently identifiable by their behaviors and personalities, most rebelling against and withdrawing from society, conventional morality and organized religion, although using the drug culture and mystical religions to meet similar needs. (3) The study by Riggs, however, found the personalities of habitual, occasional and non-users of psychedelic drugs essentially similar, except that habitual drug users showed less endurance. (4) The Brosseau report proposes increased coordination and cooperation between the various public and private drug-related services; development of preventive programs in the schools, emergency crisis treatment centers and a center to treat abusers with associated psychological problems; and emphasizes the need for research and evaluation. (KS)

PSYCHOLOGICAL AND PERSONALITY UNDERCURRENTS OF A DRUG USER

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Introduction.

There is a drug problem in Edmonton, however defined. This topic has been approached by the writer with caution, because the "drug scene" changes almost daily and much which has been discussed and written about "youth and drugs" was dated before release. In surveys taken recently in scattered cities across Canada the results have surprising similarities. * A substantial percentage of young people are trying drugs; by far the most common usage still occurs with tobacco and alcohol.

However widespread usage of tobacco and alcohol has not caused as much concern among adults as the recent explosive increase in the use of inhalant solvents; marijuana, its derivatives and associates, LSD and its associates, amphetamines and related stimulants, barbiturates, other depressants and tranquilizers, other hallucinogens and opiates. Widespread usage of one or more of these drugs has resulted in publicity, confusion

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- * Edmonton Public School Board. Report on Drug Education, September, 1969.
Friesen, J.D. "Some Observations and Data on the Vancouver Hippie," Canadian Counsellor, 3:3, June 1969.
Sharoff, R.L. "Character Problems and Their Relationship to Drug Abuse" American Institute for Psychoanalysis, Paper Presented Jan. 22, 1969. New York Academy of Medicine.
Unwin, J.R. "An Overview of the Drug Scene". Seminar on Use and Misuse of Drugs, October, 1968.

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and anger among citizens, with entrenched positions being taken by many otherwise broadminded members of one or the other of the helping professions.

① Unfortunately "scare campaigns" and strict enforcement have not alleviated this snowballing problem. A recent Toronto study among drug users * showed 75% of the students learned most about the problem from their own experience, next most from friends (12.6%), while news media lagged badly (3.9%). Lack of awareness among adults has, in the writer's opinion, magnified the problem, making it difficult to look at the situation objectively and realistically. There must be behaviors and personality traits which are identifiable and consistent among many drug users. Society's conception of the "hippie" as opposed to the "straight student" makes these traits difficult to find. A look at some people with drug problems may help shed some light on the question in this city.

The Problem Is Real

② Some research studies have indeed shown different behaviors and personality traits among "users" and "non users" of drugs. Some of these differences will be discussed in this paper. However, the writer would like to underscore the danger of classification in this area. Not all people who drink are alcoholics, and social drinkers are readily accepted in today's society. It is the writer's view that many young people are trying drugs simply to experiment, as we experimented years ago with alcohol.

There are the, those young people, who wish to belong to, but

* Ontario Research Addiction Foundation. "A Preliminary Report on the Attitudes and Behavior of Toronto Students in Relation to Drugs", Toronto, Addiction Research Foundation, 1969.

are at the same time rebelling against, our society. Surely their problems are situational and must be treated as such. If we continue our black-white dichotomy, many of these teenagers will join the "drug culture" for lack of a better alternative. This is not a plea for legalization of marijuana or a specific change in any law or policy, simply a desire for recognition of degrees of severity in drug usage. All experimenters are not "heads". Keniston * has talked about "tasters, seekers and heads," labelling only the "heads" as having a significant degree of psychopathology.

In Edmonton now there are "the tasters", who are finding out for themselves about drugs. "The seekers" have been defined as "seekers after truth" and they too are prevalent. Renewed interest in Eastern religions and mysticism of all types characterize this group. The "Heads" are alienated and are escaping through the use of drugs. These are the people often seen by doctors, psychologists, and others, in manic, depressed, or suicidal states. These young people are in trouble and are identifiable. Their psychological makeup will be discussed at some length.

An Attempt At Classification.

There have been many attempts to classify behavior from alcoholism, perhaps beginning with Freud who believed alcoholism was the result of strong oral influences in childhood. While this may be speculation, Sharoff * makes a strong case linking aggression and sexual drives to abuse of alcohol.

In the same manner he presents narcotic addicts as "non-aggressive, passive, and withdrawn". The narcotic user meets his need

* Sharoff, R.L. "Character Problems and their Relationships to Drug Abuse", American Institute for Psychoanalysis, Paper presented January 22, 1969. New York Academy of Medicine.

by withdrawal; withdrawal from conflicts without need for struggle or condemnation. While these seem to be contradictory types of people, there is, as is well known, a link between alcohol and narcotics.

The so called "soft drugs" such as marijuana and [?]LSD have somewhat different effects and are again preferred by a different type of individual. The narcotics user has traditionally come from ghettos and low socioeconomic status, the LSD user may be from any social class. Indeed drug use has been widespread at the University level. Certainly usage of these drugs has been a form of rebellion. Unwin* has noted "that the chemical substance most responsible for the spread of the Psychedelic drug cult was printers ink". Indeed the media have sensationalized the drug scene, but recently reports have shown users tend to discredit this information in any event.

3 There may be a point to further subdivide people according to their drug preference. However the writer has found in this city the chronic drug user "does drugs" i.e. he takes whatever drug is available to him, be it marijuana or hashish, amphetamines, barbiturates or others. In my view the chronic user is withdrawing from our society, but not from society. The "drug culture" has a strong hold on its members and many individuals wishing to discontinue drug use cannot do so because of this approach - avoidance conflict. Many needs including attention, affection, belonging are being met in this subculture, where conformity produced loneliness and estrangement. Unfortunately the drug scene itself often creates paranoia, fears and estrangement, so many young people

* Unwin, J.R. "An Overview of the Drug Scene". Seminar on Use and Misuse of Drugs, October, 1968.

seeking help seem to find no acceptable alternative.

Some Vancouver Data

Recently Friesen * attempted to describe the "Hippie" in terms of standardized psychological tests and did indeed find them to be different from norming groups. Friesen's hippies were not necessarily drug users, but as they were selected from appearance, employment status, habitat, etc., it would be a reasonable assumption that all or nearly all were confirmed drug users.

From the 16PF (IPAT, 1964) the hippies were found to be weaker in super ego strength i.e. they disregard manners and morals and are less persevering, responsible and conscientious. They were further described as unconventional, sensitive, imaginative and somewhat hysterical. They lacked a consistent pattern of socially approved behavior and were less inclined to moralize, while willing to experiment.

The Study of Values showed hippies to be more interested in aesthetic and theoretical values and less interested in economic and religious values than college students. The low score on religion was rejection of organized religion, not necessarily or likely rejection of religion as a mystical experience.

On of the Minnesota Multiphasic Personality Inventory the hippies were different from average in most categories. In general the results reflect signs of personality stress (f), a flagrant disregard for social conventions and mores (Pd), a cultural, artistic, and literary interest in the males (Mf), some evidence of suspicion, and latent hostility in the females (Mf), a preoccupation with inner thoughts,

* Friesen, J.D. "Some Observations and Data on the Vancouver Hippie", Canadian Counsellor, 3:3, June, 1969

feelings, and anxieties, and little emotional intensity in interpersonal relations (Sc).*

Behavior Characteristics of Users and Non Users.

In 1969 the Edmonton Public School Board** prepared a report on drug education. In this report they characterized different behaviors of students who were or were not drug users. Many of their findings are from a 1969 report by the Ontario Addiction Research Foundation. These behaviors are summarized below.

It has already been noted that drug users discredit news media while non users see this information as useful. As expected non-users were more conservative about society's rules for drug use, with leniency advocated by a higher percentage of users.

(4) With respect to school performance, ^{non} users reported better achievement and were more active in extra curricular activities. Most students in both groups condemned the school for moralistic and unrealistic drug information.

Home influences had some relevance to drug usage. More users indicated one or both parents used tobacco and alcohol than non users. Sibling use of drugs was extremely influential in starting users on this path. Younger children in the family tended to be users more than older children, perhaps relating to the "need for achievement" of "first borns".

* Friesen, J.D. "Some Observations and Data on the Vancouver Hippie", Canadian Counsellor, 3:3, June, 1969

** Edmonton Public School Board. Report on Drug Education, Sept, 1969

Drug use was much more prevalent among students oriented toward the peer group than those oriented toward home or school.

The preferred reasons for drug taking from several studies are listed below : *

- To relieve or escape home tension or school worries.
- To feel with new body sensations or images.
- For fun, kicks or thrills.
- For curiosity - want to find out what it's like.
- To feel at home with the group
- Drugs make you feel good - it's a nice sensation
- Drugs are a good way to change your mood.
- Drugs are one way to rebel against adult authority
- Because of boredom - there is not much else to do.

(4)

Summary.

The writer believes that habitual drug users can be identified by their behaviors and personalities. All young people taking drugs occasionally do not exhibit these characteristics.

The user is likely to be rebelling against society and withdrawing from it. He is likely a "dropout" or "underachiever" in school and disinterested in education. He may be of any social class, but is likely to have aesthetic and theoretical values. His religion is likely all embracing and mystical. He may have real hatred towards authority figures and utter disregard for conventional morality. He will be concerned with "feelings" rather than cognitive learnings.

* Edmonton Public School Board. Report on Drug Education, Sept., 1969

He could well be lonely and/or depressed, but still be surprisingly open to a non threatening and trusted adult. Many users have sexual problems and almost always they are afraid.

This is recognized to be an unhappy, but in the writer's opinion, accurate picture of an individual in desperate need of help. The drug problem is serious.

/ds

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STUDENT DRUG USE AND THE HANG-LOOSE ETHIC

presented at C.G.C.A. Convention, June 1, 1971
by Wes Hughes, Student Counsellor
N.A.I.T. 11762-106 Street
Edmonton, Alberta

SAMPLE:

Stratified random sample of 333 Northern Alberta Institute of Technology (NAIT) students in all 47 technologies.

QUESTIONNAIRE:

35 pages, 229 questions. Took about 45 minutes for most students to answer all items. This questionnaire was adapted from the 1968 Michigan Drug Study done by Richard Bogg and others.

The Questionnaire contained items measuring:

- (1) the beliefs, attitudes, values, and behaviors of the students which indicated their belief in, and adherence to the hang-loose ethic. The hang-loose ethic is opposed to the Protestant and Puritan ethics.
- (2) student's use or non-use of several drugs "to get high"
- (3) demographic differences

HYPOTHESIS:

The more the students embrace the hang-loose ethic the more likely they are to use drugs (marihuana).

The hang-loose ethic is a personal and social ethic which is irreverent, antagonistic, and questioning to the ideas of the Protestant ethic and the ideas and beliefs of most adults. It emphasizes the freedom of each individual, and encourages tolerance, spontaneity, openness, equality, and liberal beliefs. It is especially opposed to systems, beliefs, and societies which limit, categorize, and are unbending and compulsive.

Results:

In over half of the cases student marihuana users subscribed to the hang-loose significantly more (at the .05 level or better) than non-users of marihuana.

This relationship between student marihuana users and belief in the hang-loose ethic was evident in the behaviors, attitudes and values, and self-concepts of the students.

Behaviors measured included participation in activist group(s), underground newspapers (s), anti-war campaign (s), rock festival (s), failing school averages (ns).

Attitudes measured included educational attitudes, political attitudes, and social attitudes. Educational attitudes included desire for scholarship (s), desire to learn (s), student participation in school activities (ns). Political attitudes included student participation in political activities (s), the military draft (s), Viet Nam war (s), enforcement of laws (s), abolishing monarchy (ns), Canadian Indians (ns). Social attitudes included family closeness (s), family activities (s), "anything goes" (s), attitude toward achievement and success (s), hypocrisy of parents (ns). Alienated students did not use marihuana significantly more.

Self-concepts (personality) - measured included apathy and cynicism (s), anti-establishment feelings (s), feelings of morality and justice (s), conformity and materialism (ns), feelings about hypocrisy (ns).

The results of this research also indicated that the N.A.I.T. marihuana users tended, more often than non-users, to be male, urban, agnostic in a one year technology, and in favor of a good time. Most marihuana users reported being introduced to the drug by a close and respected friend. These users emphasized the importance of the group processes when smoking marihuana. These results were similar to those reported by Blum (1969), Goldstein (1966), and other student drug researchers cited in the M.Ed. thesis.

Chapter II (A Review of Related Theory and Research) of this thesis reviewed drug use on North American campuses and discussed the several factors involved in student drug use.

Code:

(s) = significant at .05 level or better

(ns) = not significant

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STUDENTS AND DRUG USE:

A Study of Personality Characteristics and Extent of Drug Using Behavior

**Study Completed in February, 1971, Edmonton Alberta and
Summarized For Presentation
To the Canadian Guidance and Counseling Association Convention**

**E. Riggs
May-June, 1971**

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This research was designed to examine the prospective relationship between selected personality and attitudinal variables, and comparative extent of drug-using behavior. More specifically, it was designed to determine the existence of differences, on selected personality and attitudinal variables, among groups of adolescents, categorized according to the extent of drug usage, characteristic of their respective memberships. The study was prompted by review and observation of the dearth of conclusive research, specific to identification of personal-social factors relevant to the drug-using phenomenon among youth. The wealth of public and authoritative opinion available, which suggests salient differences between individuals and among groups of individuals according to the extent and amount of drug usage involved with each, was thus empirically unsound and far from conclusive. Profound statements from authorities in many areas of specialty (including psychiatry, medicine, sociology, pharmacology etc.) were found to contain a common persuasion: that differences do exist between habitual drug users, non-users, and those who "dabble" in usage of psychedelic substances, and that such differences vary widely, from behavioral indices such as drop in school marks to the extremes of psychopathology. The present study, hardly exhaustive in nature, related itself to an examination of such prospective differences, specifically, to an evaluation of group differences on select personality variables among habitual users, occasional users, and non-users of psychedelic drugs.

RESEARCH DESIGN

Three groups of adolescent high school students, characterized according to extent of drug usage were to be compared on two indices (a total of 16) of personality constructs, including 15 personality traits and one attitudinal dimension. It was hypothesized that no significant differences would be found among groups according to said variables.

The Sample

The sample population for this study consisted of 60 subjects, selected from the grade twelve student body of a large Edmonton Composite High School. The subjects were categorized into three groups of 20 (10 male and 10 female) individuals, according to the respective extent of drug usage characterizing each, and were so classified as:

1. Habitual Users--individuals who used substances regularly and more than twice per week. This group was selected randomly from a total population of 48 clients, undergoing intensive psychological counseling related to their drug-using concerns.
2. Occasional Users--individuals who used substances intermittently but regularly (at least twice per month). This group was selected randomly from a total population of 50 clients undergoing assistance from school counselors and self-admitted users.
3. Non Users--individuals who had never (nor had any intention thereof) used substances. This group was selected randomly from a total population of 50 students selected by teachers to be likely non-users, and further, self admitted to be non-users.

Individuals inclusive of the three groups were matched carefully to control for age (all were 19 years of age), sex (equal numbers of males and females in each group) and educational level (all were grade twelve students). Rigorous control of variables otherwise relevant, such as socio-economic status, family dynamics, ability levels, etc. was not attempted, however, no glaring differences were found to exist on cursory examination of such variables.

The Instruments

The Edwards Personal Preference Schedule, which provides measures on 15 personality variables, was used to establish indices on a number of relevant personality traits. It was chosen for the several reasons following:

1. It provides a systematic comparison of strengths of needs within the individual
2. It has satisfactory reliability and validity
3. It is based not only on a sophisticated theoretical formulation, but also, and more particularly, one which concerns motives in psychologically normal individuals
4. It is useful as a counseling tool
5. It is highly sensitive to group differences, a major concern of this study.

A Survey of the Opinions of Youth, an attitude scale developed by the writer, was designed for purposes of examining the direction and intensity of attitude towards drug usage and was employed with the intention of securing indices on a number of limited, however significant, correlates of the attitudinal dimension of personality.

Procedure

All subjects were interviewed by the writer prior to testing, and informed of the nature of the study. They were also assured anonymity with respect to their involvement in the study. Both instruments were administered by the writer in standardized testing situations to the total number of 60 students involved.

Hypotheses

Data were treated by using the trial or null hypothesis to determine the existence of differences on possible sources of variation. In the absence of results from drug-oriented research studies to date, predictive studies appear virtually impossible; however, observation of significant differences among respective drug-using populations would prove useful and valuable, hence the data collected for each of the three groups (habitual or regular drug users; occasional drug users, and non drug users) on selected need-oriented and attitudinal dimensions of personality were treated in the following ways:

It was hypothesized that:

1. No significant differences would be found to exist among groups of habitual drug users, occasional drug users, and non drug users, or between males and females within each group, nor would there be a significant interaction found to exist between extent of drug usage and sex
2. Respective of each variable assessed, A 2x3 analysis of variance was calculated for, and thereby served to test, each of the hypotheses.

Findings and Conclusions

With one exception, all of the major hypotheses (regarding nonsignificant differences extant among the groups involved, respective of the 15 personality variables assessed) were confirmed. The single exception was found with regard to the variable Endurance which served not only to distinguish the group of habitual drug users from others within the sample population, but also to emphasize the comparative similarity between groups of occasional drug users and non drug users; a likeness retained throughout the study. It is not surprising that the group of habitual drug users differentiated themselves according to scores in this variable, since authoritative opinion substantiates the trend apparent among this group toward "dropping out"--of school, employment, and indeed, society as a whole. Characteristically the antithesis of all representative of "Endurance", habitual users typically exhibit:

1. inability to concentrate
2. academic failure
3. lack of motivation and
4. growing apathy toward present tasks and future plans. As a group, therefore, habitual drug-using students display a significant lack of qualities pertaining to the characteristic, Endurance-qualities which, by comparison, are not apparent by their absence among groups of occasional drug users or non drug users.

Based upon group comparison, apart from this finding, extent of drug usage was found not to be associated significantly with distinctive or characteristic personality construct as measured by the Edwards Personal Preference Schedule.

Significant differences between males and females were found to exist within certain of the three groups considered, respective of a limited few of the total

number of variables assessed, and in each case, the Scheffes "A posteriori" contrasts were applied to determine the direction of significant differences thus observed. Sex differences were found to exist within the group of occasional drug users on the variable Exhibition, and within the groups of habitual drug users and non drug users on the variable Abasement. It would be conjecture to attempt to explain these results other than to suggest that sex differences on selected personality variables within groups so characterized may be anticipated, and should receive consideration in further research efforts of this nature.

Of the total compilement of variables of personality assessed, the singular variable found to exhibit differences among the groups studied, and hence to refute the major hypothesis, was that of attitude toward drug usage. The group of habitual drug users was found to differ both from the group of non drug users, exceeding chance expectation beyond the 0.01 level. Members of this group distinguished themselves thereby, as having significantly more positive or favorable attitudes toward drug usage than those of either the group of occasional drug users or the group of non drug users. This observation may be considered self-evident, or in the least, not surprising; however, the comparative coexistence of a nonsignificant difference in attitude toward drug usage between the groups of occasional drug users and non drug users indeed leads one to speculate upon the existence, thus demonstrated, of characteristics exclusive to the population of habitual drug users. Unwen, and other contemporary authorities in the field, are in agreement with this conclusion, however sybmit that such distinguishing characteristics approximate the nature of pathological states of personality. The present study lacked both intention and design to attempt assessment of the comparative existence of pathology among groups of youth respective of the extent of drug using behavior characteristic of each. It was able to determine however,

within the range of normal traits of personality studied, one which served to distinguish the group of habitual drug users from groups of occasional drug-using and non drug-using peers. The writer believes, that the attitudinal dimension thus identified as relevant, in differential respect, to the habitual use of drugs, warrants further research exploration. Further, as evidence resulting from research specific to the delimitation of same, it deserves present consideration as a distinguishing characteristic, at least proportionate to that granted the various states of pathology presumed exclusive to the habitual drug-using populace of youth.

Finally, it must be emphasized, that no difference was established regarding this, or any other characteristic presently under consideration, between groups of occasional drug users and non drug users. Proportionate as well, therefore, to the consideration given distinguishing characteristics relative to drug usage, must be granted the lack of differences, or perhaps, similarities apparent, respective of usage.

Implications

Although the results of this research should be regarded as suggestive rather than definitive, they imply a global or public need for diminished focus upon the existence of various states of deviance, or otherwise abnormal constructs of personality, presumed to characterize the sector of habitual drug users within our youth population. Further need for public awareness is apparent with regard to the lack of differences between the occasional or casual drug user and his non drug using contemporary; differences which to date, have been granted disproportionate and perhaps unfair consideration.

Social agencies, including education systems, presently involved in the provision of therapeutic, educative and preventive services to youth, regarding

drug usage, may well involve themselves with efforts to facilitate attitude formation and change, if, in fact, further research substantiates the relevance of the attitudinal dimension in this regard; particularly if attitudes are found to influence individual and group decisions with respect to involvement in usage.

The need for further research in this area is self-evident. The present study re-emphasizes this need, particularly for research directed toward more precise, and comparatively more all encompassing findings, with regard to evaluation of constructs of personality relevant to the phenomenon of drug usage. Further exploration of the attitudinal dimension is strongly recommended from the present findings.

In conclusion, results of the present study suggest that exploration of relevant dimensions of personality, particularly that of the attitudinal dimension may prove a viable approach to the study of characteristics of youth as they relate to extent of involvement with drug usage.

A REPORT ON DRUG ABUSE
IN THE CITY OF EDMONTON
TO

THE MAYOR'S EXECUTIVE
COMMITTEE ON DRUG ABUSE

PRESENTED BY:

John F. Brosseau

Chairman, Mayor's Technical Advisory
Committee on Drug Abuse

December 16, 1970

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M E M O R A N D U M

TO: The Mayor's Executive Committee on Drug Abuse

FROM: John F. Brosseau, Chairman of the Technical Committee on Drug Abuse

DATE: December 16, 1970

Please find enclosed a report on drug abuse in the City of Edmonton. This report includes a description of the activities of the Mayor's Technical Advisory Committee on Drug Abuse to date, as well as a suggested course of action for the future. A summary of the report begins on page 12, and the recommendations of our committee can be found on page 17.

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I Background Information on the Establishment of the Mayor's Committee on Drug Abuse.

Over the last three or four years, there has been a marked increase in the misuse of drugs in Edmonton. This has been noted by school officials, the police department, and the public at large. It was becoming increasingly evident to all concerned that something would have to be done to try to cope with this problem. Consequently, various organizations and individuals in Edmonton and the Province of Alberta attempted to do something in their own spheres of influence. This created many problems as there was a great deal of duplication in the services offered which created a rather chaotic and confused situation. In view of this, the Provincial Government, along with the mayors of Edmonton and Calgary, came forth with a proposal that a committee be established to attempt to coordinate all activities to cope with the problem of drug abuse. Their intent was spelled out in Ministerial Order 2/70. This Ministerial Order outlined the nature of the problem that had to be coped with and the structure of two committees which would work on the problem.

Following the initial meeting of the Mayor's Executive Committee on Drug Abuse, a Technical Advisory Committee was established. The Technical Advisory Committee consisted of various persons from the community of Edmonton who, in one way or another, were familiar with the drug scene. The following is a list of the members of the Technical Advisory Committee on Drug Abuse.

Mr. J. Brosseau, Chairman
Mr. Dave Rehill, Executive Secretary
Dr. D. Phillips, City Health Department
Inspector W.H. Stewart, City Police
Mr. Alan Goard, City Social Services
Mr. J.D. Lee, Attorney General's Department
Dr. H.M. Wojcicki, Psychiatrist
Dr. D. MacDougall, Edmonton Catholic School System
Mr. R. Verge, Department of Youth
Dr. E. Church, Department of Education
Dr. L. Ferguson, Department of Education
Dr. K. Grierson, Edmonton Public School Board
Dr. J. Read, University of Alberta Hospital
Mr. Eugene Dubord, Department of Social Development

II Action to Date

During the first meeting of the Technical Advisory Committee on Drug Abuse it became very clear to us that an emergency situation appeared to be shaping up for the summer of 1970. We felt that because of this predicted increase in drug abuse, there would be a far greater number of people requiring treatment for crisis reactions to drug abuse. Since our first meeting was held on April 14, and school would be out in Edmonton on about June 15, we felt that we must direct all of our energies towards the crisis aspect of the drug problem. However, we realized that this was just a temporary measure and not a final solution to the drug problem. It would not directly help coordinate the various agencies in the City of

Edmonton who were dealing with the problem of drug abuse. We proceeded along two tacks in order to handle crisis reactions to drugs. First, we contacted the medical directors of all of the active treatment hospitals in the City of Edmonton and discussed with them procedures which could be followed in their emergency wards to facilitate the treatment and handling of persons seeking medical aid for crisis reactions. Secondly, we worked closely with an indigenous group known as "Trust" who had been working for some time in the City of Edmonton with persons who were having crisis reactions. Trust suggested the establishment of a center for people undergoing crisis reactions. We were of the opinion that this would be a valuable service as it would take some of the load off the emergency wards in the hospitals, which were frequently not very suitable for dealing with this sort of problem.

The Trust group came to our committee with a proposal that a center be established. This center would be a place where persons experiencing difficulties with drugs could come for assistance. This center was to be known as "The House" and would provide the following services:

- 1) An information service on drug abuse.
- 2) A referral vehicle for persons experiencing drug problems who needed help provided by another agency.
- 3) A place where a person who is experiencing a crisis reaction could come and have individuals present try to help "talk him down" from his reaction.
- 4) A center which would receive people who have been released from hospital following treatment for a crisis reaction.

- 5) A liaison with the street scene.
- 6). A service to emergency wards by simply staying in the emergency ward and observing a person who had been given medication by a doctor for a crisis reaction to drugs.

It was decided that Trust organization should be established under the Societies Act of Alberta and that it have a Board of Directors. Members of the Board of Directors are Dr. John Read, Chief Administrator of the University Hospital, Chairman; Dr. Phillips, City Board of Health, psychiatrist; Mr. Mel Binder, a legal attorney, legal advisor; Mr. Newhouse, Chief Financial Administrator at the University Hospital, financial advisor; and Mr. Ed. Delong, Director, Downtown Youth Center, as youth representative. The director of this program was Mr. Rod West, who was responsible for the daily operation of Trust. It was agreed that all funds coming to Trust would come to them via their Board of Directors, who would be responsible and accountable for proper expenditures of these funds.

Once Trust firmly established its goals and established an administrative organization, we reviewed a budget which it presented to us for funds to carry out its programs. After careful scrutiny of this budget, it was forwarded to the Mayor's Executive Committee with a recommendation that requested funds be provided. Eventually, a grant of \$20,000. was made available by the Provincial Government to Trust to carry out its work. In addition to this, there was a house, with phones and utilities supplied, at no cost, by the City of Edmonton.

Over the last few months, our committee has become somewhat concerned as to the future role which can be performed. It would appear that various agencies in the City of Edmonton are becoming more involved in the whole area of drug abuse and there is still little, if any, coordination. It would also appear that little attention is being given to long range treatment facilities, rehabilitation facilities, and educational facilities. Our committee was also concerned as to how Bill 51 and Act respecting the Alberta Alcoholism and Drug Commission would affect our function. This concern was resolved by the Minister of Education, Mr. Clark, who at a recent meeting informed us that at least for the first couple of years of operation, Bill 51, would concern itself primarily with the problem of alcohol and not drug abuse. In view of this, Mr. Clark was of the opinion that our committee had a purpose, and it should continue to function. At this same meeting, it was the expressed wish of the Executive Committee that the Technical Advisory Committee make a presentation to the Executive Committee on December 16 and that the Minister of Health, Social Development, and Youth be invited to attend. It was agreed that this presentation should consist of our recommendations to date.

III A proposal for the Future

There has been a tremendous increase in drug abuse in Edmonton since 1966. Although this began as a phenomenon among persons in their late teens and early twenties, it has not restricted itself to this age group. The abuse of drugs has been moving down into the early teen and pre-teen years, as well as upward into the adult community. Abuse of drugs knows no class restrictions. Persons involved in it come from all socio-economic

levels. No one drug seems to have taken over the market. Rather, a "mixed bag" appears to be the rule. LSD, marijuana, hashish, and MDA are all in common use. There is also a disturbing increase in the use of heroin. According to the University of Alberta Hospital, they are aware of 30 heroin addicts in Edmonton. Last year at this time, they were aware of none.

There is no simple solution to the drug problem. We have learned, by coping with other problems in life, particularly those dealing with our environment, that short-term cures which are introduced are often as harmful as the original problem. There is no unitary reason as to why people take drugs. There are almost as many explanations as to why people take drugs as there are people in fact taking drugs. Patterns of drug abuse also vary tremendously with the individual from the occasional user to the confirmed addict.

If we are to cope effectively with the drug problem in Edmonton, certain facilities will be needed in order to meet the need. In particular, we must think of: preventative measures, emergency medical treatment and rehabilitation. Preventative measures, in the form of research and information, are needed. In order to carry out an effective education program, it is necessary that drug abuse information be factual. Some of our youth believe that information on drugs, which authorities in the establishment have presented to them, is inaccurate. Therefore, the onus is on us to see that research is done on drugs and the problem of drug abuse so that we have hard data available to present to youth. This should have a salutary effect upon our society's ability to communicate in a credible fashion with

its youth. The foregoing situation outlines the need for research in order that accurate information on drugs be available for the purpose of public information.

Increasingly, people are requiring hospitalization for bad drug reactions, consequently, there is a need for primary medical treatment of these persons. However, at the same time, we know that many young people on bad drug reactions avoid hospitals for fear that their parents or the police will be called in. One of the best answers to this problem seems to be the establishment of itinerant youth groups, with a wide spectrum of medical and professional services available to them. This has been done in Edmonton through Trust. In addition to the foregoing, it is essential that medical doctors have available to them an analytical service which can inform them of the drugs in current use on the street scene, and types of reactions to expect and treatments to be administered. At present, the University of Alberta Hospital is providing this service.

Once a person has received emergency treatment for his drug problem, we must look at the problem from a rehabilitative point of view. At a primary rehabilitative level, we can look to having teachers, counsellors and parents assist persons who are in need of help in overcoming a potential drug problem. However, before these people will be able to perform a helping service, they should receive training. At a secondary level, it would be desirable to have drop-in centers where professional and non-professional counselling services are provided to persons wanting assistance with a drug problem of moderate severity. At a tertiary level, intensive psychiatric and professional help could be provided for persons with severe

drug dependency problems which have associated social and emotional problems.

In order to provide the aforementioned facilities, it will be necessary to devise an administrative structure to integrate these facilities for drug abuse with other community services attempting to cope with social problems. A basic assumption underlying the proposed administrative structure is that drug abuse is multi-faceted, both in terms of its causes and its remediation. There is no single unitary solution and any solution which is devised must take a total approach to the problem and involve a number of disciplines. In view of the foregoing, a solution which is to have lasting value in combating drugs in the City of Edmonton must do so by cooperating with existing services in Edmonton and not simply by providing new structures and services.

Following is the administrative structure which we believe should be used to implement a program and facilities for combating the problem of drug abuse. The City of Edmonton should be broken into three geographic areas. The present boundaries of the three regional offices of the Provincial Department of Social Development, located in Edmonton, should be used. Within these three areas, an integrated attack upon the drug problem should be pursued. In particular, we are hoping that agencies such as the regional offices of social development, the child guidance clinic, the school systems, the community psychiatric services, the active treatment hospitals and the public health clinics will all be able to function together in a cooperative fashion. In addition to the foregoing, this administrative structure will have a secondary value of being able to cooperate with the Mayor's Committee or Human Resource Development which is attempting to establish better

cooperation and coordination between the various agencies, both private and public, that are trying to cope with all social problems.

To date, our committee has been a Technical Advisory Committee on Drug Abuse. However, our proposal may necessitate some revamping of the structure and function of our committee, in that we are assuming some executive functions. It is recommended that our committee be expanded to include representatives from the private sector, such as the United Community Fund. Our committee, under the new structure, would strike three sub-committees, one for each of the three areas which we propose be established in the City of Edmonton. Each sub-committee would have a nucleus of a social worker, a psychologist, a psychiatrist, an educationalist, and a registered nurse, who, in initial phases of this proposal would work on a part-time volunteer basis. Their function would not be a service function, but rather a liaison and advisory function to various social services in their area of the city that provide a service which could be used to cope with drug abuse. Ultimately, their goal would be to strive for better cooperation between agencies trying to cope with social problems in their area of the city. It would also be the responsibility of this sub-committee to see that minimal services of prevention, education, emergency medical treatment, and rehabilitation services for drug abuse be located in or at least available to people living in their area of the city.

It is suggested that since our committee, under this proposal, has taken over some executive functions, it would be necessary for it to have a full-time secretariat. This we believe, should take the form of a social worker who could either be seconded from the Province or the City, or in lieu of

this, funds provided to our committee to hire a social worker. It would be the responsibility of the secretariat of our committee to coordinate activities of the three sub-committees in the various areas of the city. In addition to the foregoing, it would be the duty of our secretariat to help the three sub-committees in their general task of developing better cooperation between social services located in their areas. Ultimately our intention is to work on the concept of human resource development in each section of Edmonton. It is not our plan to set up new institutions or hospital facilities. Rather, we are attempting to develop a better sense of cooperation between various agencies working in the area of social problems in the City of Edmonton with particular emphasis on the drug problem. This is done in order that anyone who is in need of assistance with a social problem, can receive it in an effective and efficient manner. As this area concept develops and there is more cooperation between agencies in each area, it may become necessary to hire a secretariat for each of the three areas to coordinate the activities of all of the agencies in point. In the distant future, it may also be necessary to establish central clinics embodying a whole range of social services for each area. The foregoing long range goal is the same as that of the Mayor's Committee on Human Resource Development and we must keep in close contact with it to see that we are supplementing its work and not competing with it.

Funds which the Provincial Government sees fit to earmark for projects on drug abuse recommended by our committee, should be placed in the hands of the Alcoholism and Drug Commission (Bill 51), or another suitable government agency such as the Human Resource Authority, for later disbursement to the various projects on drug abuse. Insofar as the City of Edmonton is concerned,

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it could continue to support projects on drug abuse as it supported Trust. That is, its support could come in the form of supplying buildings, utilities, phones, and the assistance of staff from their social service and health divisions.

SUMMARY OF PROPOSAL

1. Problem

The problem which we are dealing with is drug abuse. In particular, we are concerned with its epidemic nature, especially in our youth. Statistics supplied by the City of Edmonton Police Department and the University of Alberta Hospital give us little reason to be complacent about the problem.

- A. Dr. H.W. Kuckertz, who is in charge of the emergency ward at the University of Alberta Hospital, maintains that they are presently handling approximately three times as many cases of drug abuse as they did last year.
- B. The City Police records indicate that there is a continuing increase in drug abuse. Following is a summary of drug arrests in the City between 1966 - 1970.

1966	-----	17 arrests
1967	-----	77 arrests
1968	-----	191 arrests
1969	-----	338 arrests
1970	-----	403 arrests

(January 1 to December 1 only)

In addition to the foregoing, there was one arrest in September, six in October and one in November 1970 involving heroin. There were no arrests in 1969 involving heroin.

2. Objectives

In order to cope with the drug problem effectively, the following objectives have been established.

- A. To view the drug problem in the context of other social problems and not as an isolated happening.
- B. To prevent new cases of drug abuse.
- C. To reduce the present amount of drug abuse.
- D. To treat crisis reactions to drug abuse.
- E. To provide treatment for drug abuse problems having associated severe social and emotional problems.
- F. To rehabilitate persons with drug abuse problems.

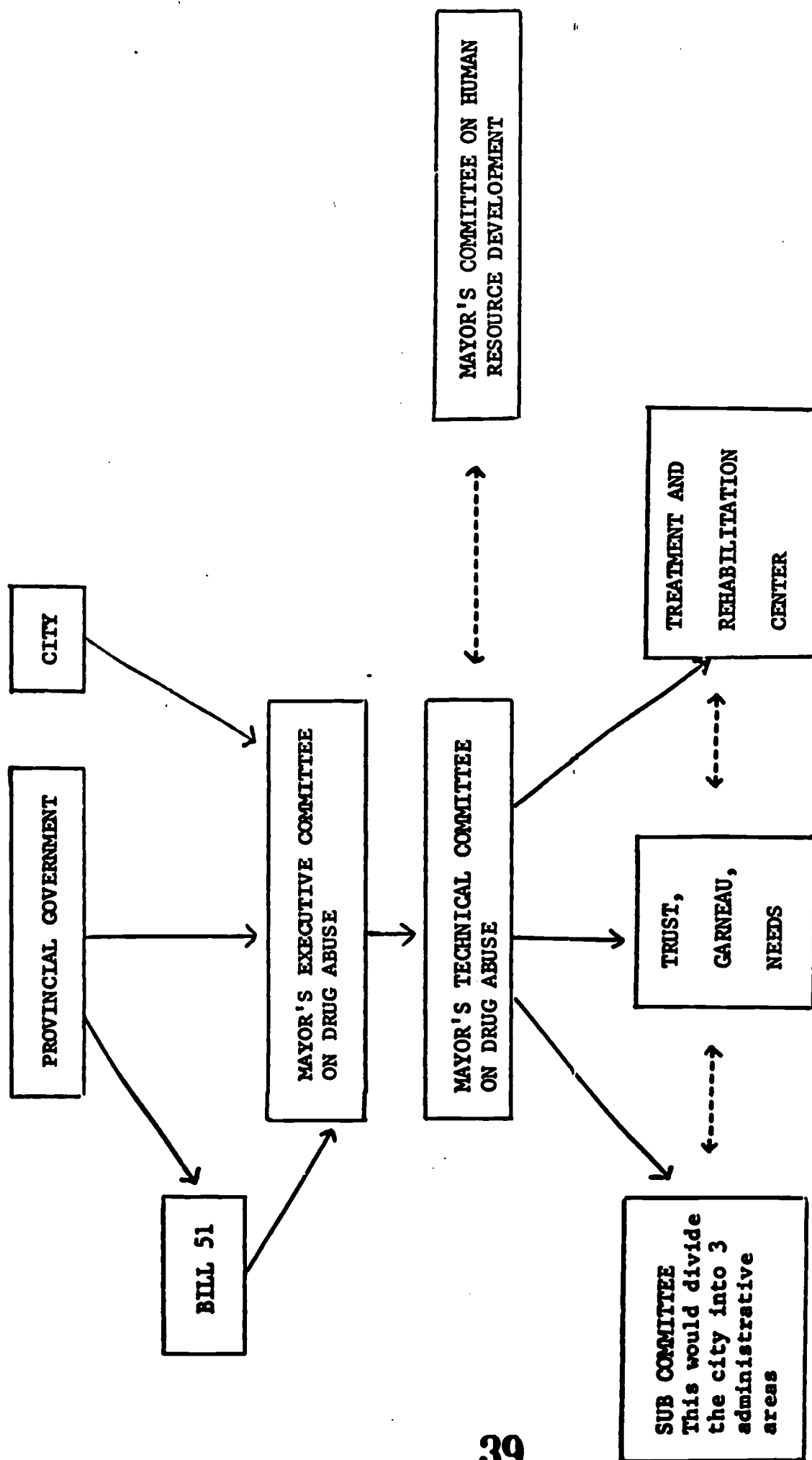
3. Facilities and Programs

To meet the objectives which have been established, certain new facilities and programs must be provided, and existing facilities must be made use of in a more effective way.

- A. By taking an integrated approach to the problem, we are more likely to focus the present resources of the City on the problem. This can be achieved by striving for better cooperation between emergency wards of hospitals, the health departments, schools, social development departments, and many other public and private services. (This in part has already been achieved by the wide base of representation found on the Mayor's Technical Committee on Drug Abuse.)

- B. Preventative programs focusing on youth would be administered through the schools in close consultation with other agencies. It is suggested that the Department of Youth continue their drug education program and continue making their services available to schools.
- C. Emergency crisis treatment centers such as the emergency wards of hospitals, Trust, Garneau Drop-In Centre and Needs.
- D. A centre to treat persons with chronic drug abuse problems with associated social and emotional problems. This may involve the establishment of a separate new facility with staff which would provide an ongoing treatment and rehabilitation program.
- E. A research and evaluation program to more clearly outline the problem and evaluate our programs to see if our objectives are being achieved.

4. Administrative Organization



5. Finances Required

A. For the salary of one full time person.

This person should be a social worker. He would be attached to the Division of Psychiatry, Local Board of Health and administratively responsible to Dr. D. Phillips. He would be a resource person to the Mayor's Committee on Drug Abuse. \$15,000.

B. For the development of preventative programs by the schools.

Funds would be needed for materials, workshops, staff. \$20,000

C. For three emergency crisis centers. Here we are referring

to such groups as Trust, Garneau Drop-In Center and Needs. \$90,000.

D. For a treatment and rehabilitation center to withdraw

individuals from the drugs which they are using. In addition they would require counselling and care in a setting which would prepare them to return to society.

This center would focus on cases of severe drug abuse with marked emotional and/or social problems. \$100,000.

E. Research and development.

\$50,000.

TOTAL

\$275,000.

These funds would be held in trust by The Alcoholism and Drug Commission (Bill 51,) or another suitable government agency such as the Human Resource Authority, pending detailed budget submissions by the Mayor's Technical Committee on Drug Abuse.

RECOMMENDATIONS

1. That the Mayor's Technical Advisory Committee on Drug Abuse be known as the Mayor's Technical Committee on Drug Abuse in order to reflect more effectively our changing function. With the new role the membership of the committee should change to include a representative from the Provincial Department of Health and the private sector.
2. That the City of Edmonton be divided into three zones. Within each of these zones, a sub-committee would be struck, under the direction of the Mayor's Technical Committee on Drug Abuse to try to achieve better co-operation between all social agencies so that the drug abuse problem can be dealt with more effectively through maximum use of present resources.
3. That there be in Edmonton the following services for drug abuse:
 - a) A suitable prevention program be organized for youth.
 - b) An emergency center for persons experiencing drug abuse reactions.
This may take the form of Trust or other organizations which may develop with a similar orientation such as Garneau Drop-In Centre, and Needs.
 - c) A treatment and rehabilitation center for persons with severe drug abuse problems which require professional medical and counselling assistance.
4. That requested funds be allocated to the Alcoholism and Drug Commission (Bill 51) or another suitable government agency, such as the Human Resource Authority and held in trust pending detailed budget submissions by the Mayor's Technical Committee on Drug Abuse. The aforementioned agency would then be responsible for allocating these funds on the recommendations of the Mayor's Technical Committee on Drug Abuse.

5. That funds be made available to carry out recommendations 1-3. The suggested sum is \$275,000.
6. That the Alberta Medical Association be requested to establish a sub-committee of the Mayor's Technical Committee of Drug Abuse to investigate in Edmonton, the problem of physically addictive drugs, i.e. heroin. In particular they should be charged with the task of identifying whether or not a facility is needed for drug addicts and if there is, how should it be established.

JB/sc